ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	2/2
FORMALITY REVIEW	AM	896	02/2x/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
— (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Final	Original	Claim	Date
	4/4/a	1	+
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Final	Original	Claim	Date
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Final	Original	Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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